# STATE OF DELAWARE

# SINGLE POINT OF CONTACT - SPOC 02-23-10P01:02 RCVD INTERGOVERNMENTAL REVIEW OF FEDERAL PROGRAMS

Office of Management and Budget Haslet Building, 3<sup>rd</sup> Floor, Dover, Delaware 19901

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STATE APPLICATION IDENTIFIER:	_				******	allyllo
S0-02-15-01		SPOC use Of	VI Y	Month	Reviewer	CC's
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Applicant Project Title: Delaware Health Information N	letwork (DHIN)					
Applicant Department: DE Health & Social Services / 6     Secretary / DE Health Care Co		4. Applicant Divi	sion/APU:	35-01-12		
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Federal Grantor Department:     Department of Health an (DHHS)	nd Human Service	es 10. Fe	ederal Sub		e of the National th Information Te D)	
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Office of the National Coordinator for Health Department of Health and Human Services 200 Independence Avenue, S.W. Suite 729D Washington, DE 20201		nology				
14. Federal Program Title:		15. FEDERAL C		NO: DA)		
American Recovery and Reinvestment Act of 2009: Beacon Community Cooperative Agreement Program			93	727		
16. Project Description:		<u> </u>	·			·····
The Beacon Community Cooperative Agreement Progra Delaware Health Information Network for information ex- hospitals in demonstrating meaningful use of health info	change among S	tate systems and v	vith the co	mmunity; as well.	as to support phy	to the sicians and
17. Will funds be utilized for any technology initiatives? xY	′es □ No If	so, Business Case	Number a	and brief project s	ummary:	
20071286_01_01						
18. Measurable Objectives; a. What were last year's objectives?						
N/A						
b. Were these objectives met? (If not, please explain	why)					

c. What are this year's objectives?

24. How many positions are required for the project?

Plan and develop priority implementations for electronic health record systems to support data exchange among state agencies and with community providers (i.e., immunizations, newborn screening, prison health services, mental health and substance abuse, child mental health, etc...).

Implement standard Continuity of Care Document (CCD)/summary record to facilitate care coordination among multiple providers and across care settings to improve quality of care and reduce costs (ie, long term care, home health, mental health and substance abuse, physician, hospital, etc...).

Develop plan to connect to federal health systems (VA and Dept of Defense) to facilitate care coordination for veterans, active duty personnel and their families who obtain care both in the private and federal healthcare systems.

(If more space is needed, please attach a separate sheet of paper) 19. Grant Period: 20. How many years has this project 21. If the project was funded last year, how much federal money was awarded? been funded: N/A From: April 2010 N/A, new project To: March 2013 22. Source of funding for this application: Dollars **Budget Code** \$20,000,000 a. Federal grant b. Other federal funds (Specify) c. Required state contribution d. Discretionary state contribution e. Required local contribution f. Other non- federal funds (Specify) **TOTAL** \$20,000,000 23. Budget by cost category and source:: Federal State Other Total Funds Funds Funds **Funds** Salaries & Fringe Benefits \$20,000,000 Personal or Contractual Services \$20,000,000 Travel Supplies & Materials Capital Expenditures **Audit Fees** Indirect Costs: Other \$20,000,000 **TOTAL** \$20,000,000

Breakdown of position(s)	Authorized in State Budget	New Positions Required	Total
Paid for out of federal funds			
Paid for out of General Funds			
Paid for out of state special funds			
Paid for out of bond/local/other funds			
TOTAL			
PLEASE NOTE: On a separate piece of paper, please give position numbe other) and the full-time equivalent for all positions required. Please identify grant funds positions within other departments, divisions and/or offices, please identify grant funds positions within other departments.	the new positions by placi ase list them.	ng an asterisk before the	position title. If this

Funding Number: HHS-2010-ONC-BC-004 CFDA Number: 93.727

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# Overview

The Delaware Health Information Network (DHIN) conducts its business through contractual arrangements with Advances in Management, Inc. for executive management and staffing support; and with Medicity, Inc. and Dell (formerly Perot Systems) for project management, software applications, data center operations, technical help desk support and connectivity expertise.

# Medicity, Inc.

Medicity will be supplying key functionality to link DHIN to the State's electronic health record (see upcoming description of the State's activities), and will be instrumental in providing connectivity in support one of the funded grants of this program, providing the ability to transmit CCD's to from gynecologists to the DHIN. In addition, Medicity will subcontract to deliver a patient portal of access to DHIN and provide a communications platform to improve communications, effectiveness, and efficiency between the patient and the provider.

# DHIN Activities

The Beacon Communities Cooperative Agreement Program (BCCAP) will fund several important activities dedicated to the improvement in care in two critical venues:

Obstetrician Electronic Health Records (EHR): part of the BCCAP will fund the purchase of up to 50 EHRs for obstetricians to allow them to send CCD and other critical information to the DHIN, so that it may be retrieved when the patient enters a facility and requires immediate treatment.

Telemedicine: the BCCAP will be used to upgrade home health in Delaware, contracting with home health agencies for DHIN defined specifications. The focus of the project would be on the CHF, COPD and diabetes patients in rural Kent and Sussex Counties, and would be used to capture additional clinical information beyond vital signs.

The BCCAP would also fund activities for the State of Delaware that aim to standardize and integrate all State health-related applications. As a result, any provider using the DHIN, with the appropriate security roles, will be able to send and/or receive data seamlessly, accurately, and efficiently with State systems, such as immunizations, newborn screening and correctional health systems.

The vision for the State EHR is to link the following functionality across various statewide programs:

Functionality	Delaware State Agency
Behavioral/Mental	• Department of Health & Social Services Division of Substance Abuse

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Health	& Mental Health Inpatient and Outpatient Services  • Department of Services for Children, Youth & Their Families Division of Child Mental Health Services Outpatient Services
Disease Management	Department of Health & Social Services Division of Public Health Immunizations, Cancer Registry, and Newborn Screening  Output  Department of Health & Social Services Division of Public Health  Immunizations, Cancer Registry, and Newborn Screening  Department of Health & Social Services Division of Public Health  Immunizations, Cancer Registry, and Newborn Screening  Department of Health & Social Services Division of Public Health  Immunizations, Cancer Registry, and Newborn Screening
	Department of Health & Social Services Division of Medicaid & Medical Services Billing
Episodic Health	Department of Health & Social Services Division of Public Health
(clinics, wellness	
centers, etc.)	
Long-Term Care	Department of Health & Social Services Division of Developmental Disabilities Services
	• Department of Health & Social Services Division of Public Health
	Department of State Veterans Home
Public Health	Department of Health & Social Services Division of Public Health
Reporting	
Well-Health (primary	Department of Correction Inmate Health Services
care)	Department of Services for Children, Youth & Their Families     Division of Youth Rehabilitative Services Juvenile Inmate Health     Services

Under the BCCAP, Delaware State agencies will develop a plan for designing an enterprise EHR for the purposes of quantifying the above listed health and clinical information across various statewide programs and connecting those programs with the DHIN. The outcome of this process will be to define priority systems for implementation, that will have the greatest impact on improving population health outcomes and supporting eligible providers and hospitals in meeting meaningful use requirements. It is envisioned that this EHR would comprise core modules common to EHR systems to maximize continuity of care across care settings and improve quality, and health outcomes.

This State EHR initiative will be phased in over 3 years as follows:

# Contract Year 1

- Convene the DHIN Population Health Committee to develop an RFP for Enterprise EHR scope definition, business requirements definition, cost analysis, and system implementation RFP development.
- Procure planning vendor release RFP, evaluate responses, negotiate and execute vendor contract.
- Conduct planning activities, including prioritizing agency EHR system implementation, data management and roll-out plan.

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# Contract Year 2

Procure EHR implementation vendor – release RFP, evaluate responses, negotiate and execute vendor contract.

- System Integration, Testing, Training, Implementation, and Quality Assessment
- Implement interfaces to/from DHIN and conduct DHIN training.

#### Contract Year 3

- Monitor the project and utilize lessons learned for process improvements for future implementations.
- Gather data from affected agencies and users to analyze and evaluate improvements in provider and patient satisfaction, outcomes and efficiencies.

A portion of the State's expenses is for the following State-approved contractor positions: IT Project Manager, Business Analyst, Financial Analyst, Senior Systems Engineer, Technical Writer/Trainer, Information Technology Architect.

Evaluation - A portion of the BCCAP funds will be used for designing, assembling, and evaluating baseline information from legacy systems. Upon installation, the newly implemented monitoring and reporting systems will enable the internal data collection of metrics to ensure successful achievement of program-selected objectives, including expansion of health IT infrastructure and exchange, and the health outcome(s) and cost savings metrics proposed by the Beacon Community and agreed upon by ONC. These systems and processes will serve to provide timely feedback to Beacon Communities on their progress and inform continuous feedback and improvement.

Surveys - DHIN believes it is important to measure the success of the project by conducting provider surveys in 2010 and 2012, enhancing the questions related to quality, cost and meaningful use of technology. The survey audience will include primary care providers, specialists, and mid-level practitioners. Additionally, the State discontinued its support of the Consumer Assessment of Healthcare Providers and Systems (CAHPS) study in 2002. This study provided consumers-reported information on quality of care and provided valuable data for health care organizations in implementing quality improvement projects. DHIN believes that this data will be an important part of informing Patient-Focused Health Care quality measures, reporting and improvements. Three surveys will be conducted: CAHPS (Consumer Assessment of Healthcare Providers and Systems), a specialist provider survey, and a mid-level practitioner survey.

# Advances in Management, Inc. (AIM)

Advances in Management, Inc. (AIM) has been DHIN's project management and staffing contractor since 2004. AIM provides executive leadership, financial management, policy development, project management, marketing, and provider implementation expertise to DHIN.

DHIN will contract with AIM to provide the following positions, which are critical to the execution of the projects defined in the BCCAP application: Informaticist, Marketing and Communications Manager, Operations Manager, Senior Program Manager. Job descriptions and requirements for these positions are located in project Attachment 6.

# Quality Insights of Delaware (QID)

A portion of the BCCAP grant will fund work from QID to provide EHR expertise to improve EHR adoption, workflow effectiveness, disease prevention management, transition of care, and provider meaningful use assistance to Delaware providers.

QID has, for the past five years, been working with a large segment of the Delaware primary care community on practice/workflow redesign. In 2005, as a result of its 8<sup>th</sup> Scope of Work (SOW) contract with CMS/OCSQ, Quality Insights recruited nearly 80 practices to participate in the Doctors' Office Quality—Information Technology (DOQ-IT) project. As part of their engagement with these practices, QID provided a baseline workflow for each practice and then assisted the practices in initiating and refining the redesigned workflow that resulted from the implementation of health information technology (health IT), including e-prescribing (e-Rx) and electronic health records (EHRs).

QID contracts with the DHIN to assist those practices with EHRs to interface directly with DHIN through their EHR. This consultation is essentially workflow analysis and redesign, coupled with interface negotiation.

A key component of meeting the *meaningful use* requirements will be expanded DHIN functional capacity and the expanded use of DHIN by a growing community of Delaware health care providers. Thus, Delaware is actively developing the electronic infrastructure to create a network of providers throughout the state that can share clinical information to enable optimal care coordination.

# Stakeholder Support

As referenced in the project narrative Stakeholder Summary Matrix, several stakeholders have committed to long-term financial support of DHIN. This support provides funding for the existing results delivery and patient query technical functionality that exists today, and also provides support to fund project management, provider implementation, stakeholder communications, governance, financial management, and policy development. Without this infrastructure, the integration and the implementation of the functionality requested in this grant would not be possible or nearly as effective.

• BayHealth Medical Center has provided financial support to DHIN since 2007 and is a contributor of medical test and report information. BayHealth also has numerous provider users who have integrated the results delivery and patient query functions into their workflows. As a result of the functionality included in this grant, BayHealth will

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have greater access to numerous State registries and will be able to implement best demonstrated practices learned from the resulting evaluation. In addition, BayHealth will benefit from the aforementioned telemedicine grant to expand the effectiveness of homehealth services in Delaware.

- Christiana Care Health System (CCHS): has provided financial support to DHIN since 2007 and is a contributor of medical test and report information. CCHS also has numerous provider users who have integrated the results delivery and patient query functions into their workflows. As a result of the functionality included in this grant, CCHS will have greater access to numerous State registries and will be able to implement best demonstrated practices learned from the resulting evaluation. CCHS will also benefit from the BCCAP, which will allow obstetricians to send CCD's to the DHIN so that hospitals and other users will have access to their information when the patient arrives and needs immediate medical care (deliveries, other procedures). In addition, CCHS will benefit from the aforementioned telemedicine grant to expand the effectiveness of home-health services in Delaware.
- **Doctor's Pathology Services** has provided financial support to DHIN since 2008 and is a contributor of pathology test and report information. As a result of the functionality included in this grant, BayHealth will have greater access to numerous state registries and will be able to implement best demonstrated practices learned from the resulting evaluation.
- Ocean Medical Imaging of Delaware and Papastavros Medical Imaging are both in
  the process of connecting to the DHIN to provide radiology reports and to display images
  to the DHIN community. As a result of the functionality included in this grant, these
  facilities will have greater access to numerous state registries and will be able to
  implement best demonstrated practices learned from the resulting evaluation.

The total amount of requested DHIN expenses related to this grant will be \$20,000,000. The following is an object-class financial summary of planned expenditures:

Object Class	Federal Funds
Category	
Personnel	\$0
Fringe Benefits	\$0
Travel	\$0
Equipment	\$0
Supplies	\$0
Contractual	\$20,000,000
Other	\$0
Indirect Charges	\$0
TOTAL	\$20,000,000

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Year 1

Below is the project cost template for Year 1, followed by a detailed narrative justification.

Object Class	Federal Funds
Category	
Personnel	\$0
Fringe Benefits	\$0
Travel	\$0
Equipment	\$0
Supplies	\$0
Contractual	\$6,656,147
Other	\$0
Indirect Charges	\$0
TOTAL	\$6,656,147

# **Contractual**

Total Cost - \$6,656,147

# Advances in Management, Inc. (AIM) -

• Total Cost - \$729,886

AIM is DHIN's executive project management and staffing contractor. Year 1 funds will be for:

- Hiring four new staff members for 12 months, including a Senior Program Manager,
  Operations Manager, Marketing and Communications Manager, and Informaticist.
  These positions are needed to support the activities defined in the grant, including
  management oversight of enhanced services, project management for implementation
  activities associated with new functions, reporting and analysis of system
  information, and support executive level communications with the DHIN stakeholder
  organizations and the Delaware General Assembly.
  - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# Medicity, Inc. -

• Total Cost - \$628,242

Medicity is DHIN's technical provider -

- Provide HIE integration into State EHR, which will feed into numerous State registries.
- Provide connectivity of gynecologists EHR to DHIN to facilitate CCD transmission

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- Integrate CCD data types into existing infrastructure.
  - o Total Cost: \$377,242
    - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.
- Subcontract with vendor (to be determined) to provide patient portal, provider communication system, consumer surveying capabilities, personal health record implementation and support. Year 1 Pilot program to support up to 1,000 employees and 10 practices.
  - o Cost: \$251,000
    - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Quality Insights of Delaware (QID) -

Total Cost - \$244,830

QID is DHIN's EHR and practice workflow specialty provider –

- Provide EHR expertise to improve EHR adoption, workflow effectiveness, disease prevention management, transition of care, and provider meaningful use assistance to Delaware providers.
  - o Cost: \$244,830
    - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# **DHIN Activities -**

• Total Cost - \$5,053,189

# Obstetrician EHR's:

- o Total Cost \$500,000 Purchase of up to 10 EHR's @ \$50,000 each for obstetricians to allow them to send CCD and other critical information to the DHIN, so that it may be retrieved when the patient enters a facility and requires immediate treatment. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Telemedicine:

- o Total Cost \$646,800- Purchase of monitoring equipment to improve home health care in Delaware, contracting with home health agencies for DHIN defined specifications. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

#### Evaluation:

o Total Cost - \$137,686 - Design, assemble, and evaluate baseline information from legacy statewide systems. Vendor to be determined.

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> Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# State of Delaware Connectivity:

- o Total Cost \$3,650,703 Procurement of planning vendor for project scope definition, detailed business requirements definition, cost analysis, and system RFP, project planning to implement statewide EHR system for areas mentioned in overview. Planning vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Survey Work:

- o Total cost: \$118,000 Implementation of three surveys/reports mentioned in overview.
  - CAHPS Survey- \$43,000
  - Specialist Provider Survey \$45,000
  - Mid-level Practitioner Survey \$30,000

# Year 2

Below is the project cost template for Year 2 followed by a detailed narrative justification.

Object Class	Federal Funds
Category	
Personnel	\$0
Fringe Benefits	\$0
Travel	\$0
Equipment	\$0
Supplies	\$0
Contractual	\$7,343,088
Other	\$0
Indirect Charges	\$0
TOTAL	\$7,343,088

# **Contractual**

Total Cost - \$7,343,088

# Advances in Management, Inc. (AIM) -

• Total Cost - \$640,727

AIM is DHIN's executive project management and staffing contractor. Year 2 funds will be for:

• Maintain four staff members hired in Year 1 for 12 months, with 3 percent cost of living increase. Initial set up costs such as furniture, computers, etc. were removed from the baseline. This includes a Senior Program Manager, Operations Manager, Marketing and Communications Manager, and Informaticist. These positions are needed to support the activities defined in the grant, including management oversight of enhanced services, project management for implementation activities associated with new functions, reporting and analysis of system information, and support executive level communications with the DHIN stakeholder organizations and the Delaware General Assembly.

> Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# Medicity, Inc. -

Total Cost - \$365,477

Medicity is DHIN's technical provider –

- Maintenance of data type and connections established in Year 1.
  - o Total Cost: \$132,977
    - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.
- Subcontract with vendor (to be determined) to provide patient portal, provider communication system, consumer surveying capabilities, personal health record implementation and support. Year 2 implementation to support up to 1,500 new employees and 15 new practices.
  - o Cost: \$232,500
    - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Quality Insights of Delaware (QID) -

• Total Cost - \$153,033

QID is DHIN's EHR and practice workflow specialty provider –

- Provide EHR expertise to improve EHR adoption, workflow effectiveness, disease prevention management, transition of care, and provider meaningful use assistance to Delaware providers.
  - o Cost: \$153,033
    - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# **DHIN Activities** –

• Total Cost - \$6,183,850

Obstetrician EHR's:

o Total Cost - \$1,250,000 - Purchase of up to 25 EHR's @ \$50,000 each for obstetricians to allow them to send CCD and other critical information to the

> DHIN, so that it may be retrieved when the patient enters a facility and requires immediate treatment. Vendor to be determined.

Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Telemedicine:

- o Total Cost \$30,900- Maintenance of monitoring equipment purchased in Year 1, to improve home health care in the state of Delaware, contracting with home health agencies for DHIN defined specifications. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Evaluation:

- o Total Cost \$240,950 Contribute to the design of state systems and continue to implement the assembling and evaluating baseline information from legacy statewide systems. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# State of Delaware Connectivity:

- o Total Cost \$4,662,000 Procurement of EHR implementation vendor and execution of system integration, testing, training, implementation and quality assessment of statewide EHR system for areas mentioned in overview. Implementation vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

Year 3 Below is the project cost template for grant Year 3 followed by a detailed narrative justification.

Object Class	Federal Funds
Category	
Personnel	\$0
Fringe Benefits	\$0
Travel	\$0
Equipment	\$0
Supplies	\$0
Contractual	\$6,000,766
Other	\$0
Indirect Charges	\$0
TOTAL	\$6,000,766

# **Contractual**

Total Cost - \$6,000,766

# Advances in Management, Inc. (AIM) –

• Total Cost - \$659,949

AIM is DHIN's executive project management and staffing contractor. Year 3 funds will be for:

- Maintain four staff members hired in Year 1 for 12 months, with 3 percent cost of living increase above Year 2, including a Senior Program Manager, Operations Manager, Marketing and Communications Manager, and Informaticist. These positions are needed to support the activities defined in the grant, including management oversight of enhanced services, project management for implementation activities associated with new functions, reporting and analysis of system information, and support executive level communications with the DHIN stakeholder organizations and the Delaware General Assembly.
  - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# Medicity -

• Total Cost - \$502,977

Medicity is DHIN's technical provider –

- o Maintenance of data type and connections established in Year 1.
- o Total Cost: \$132,977
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.
- Subcontract with vendor (to be determined) to provide patient portal, provider communication system, consumer surveying capabilities, personal health record implementation and support. Year 3 implementation to support up to 2,000 new employees and 20 new practices.
  - o Cost: \$370,000
    - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Quality Insights of Delaware (QID) –

• Total Cost - \$96,006

QID is DHIN's EHR and practice workflow specialty provider –

- Provide EHR expertise to improve EHR adoption, workflow effectiveness, disease prevention management, transition of care, and provider meaningful use assistance to Delaware providers.
  - o Cost: \$96,066
    - Staff related expenses are contracted on a fixed price basis and include all salary, travel, and overhead costs.

# DHIN Activities -

• Total Cost - \$4,741,834

# Obstetrician EHR's:

o Total Cost - \$750,000 - Purchase of up to 15 EHR's @ \$50,000 each for obstetricians to allow them to send CCD and other critical information to the DHIN, so that it may be retrieved when the patient enters a facility and requires immediate treatment. Vendor to be determined.

 Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Telemedicine:

- o Total Cost \$30,900- Maintenance of monitoring equipment purchased in Year 1, to improve home health care in the state of Delaware, contracting with home health agencies for DHIN defined specifications. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Evaluation:

- o Total Cost \$309,793 Contribute to the design of state systems and continue to implement the assembling and evaluating baseline information from legacy statewide systems. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# State of Delaware Connectivity:

- o Total Cost \$3,533,141 Implementation of statewide EHR system for areas mentioned in overview; and analysis/evaluation of provider/patient satisfaction, outcomes and efficiencies to inform further process improvements. Vendor to be determined.
  - Expenses are contracted on a fixed price basis and include all materials, salary, travel, and overhead costs.

# Survey Work:

- o Total cost: \$118,000 Implementation of three surveys mentioned in overview.
  - CAHPS Survey- \$43,000
  - Specialist Provider Survey \$45,000
  - Mid-level Practitioner Survey \$30,000